An Exploratory Study of Emotional Intelligence, Perceived Stress, and different domains of Coping Strategies Among Young Adults Residing in Kolkata

This dissertation is submitted for the partial fulfillment of the degree of
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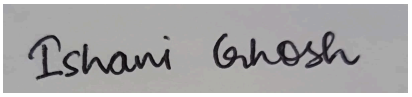
PLAGIARISM DECLARATION

“I, **ISHANI GHOSH,** hereby declare that the research work titled “An Exploratory Study of Emotional Intelligence, Perceived Stress, and Different Domains of Coping Strategies Among Young Adults Residing in Kolkata,” conducted by me, has been completed with full honesty and integrity. I confirm that the work is original, and all sources of information have been appropriately acknowledged and cited. I take full responsibility for the content and findings presented in this research."

Signature : 

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CERTIFICATE

This is to certify that the dissertation entitled "An Exploratory Study of Emotional Intelligence, Perceived Stress, and Different Domains of Coping Strategies Among Young Adults Residing in Kolkata," submitted by Ishani Ghosh, a 2nd year MSc student in Applied Psychology (Specialization in Clinical Psychology) at Sister Nivedita University, is a bonafide work , which may be placed before the board of examiners for their evaluation. This is in partial fulfillment for the degree of MSc in Applied Psychology, Sister Nivedita University.

This is an original study done by the candidate and has not been submitted by her before in any form for any other degree at this university or any other university.

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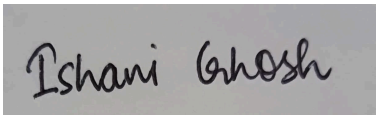

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ABSTRACT

This present study aims to explore the relationship between emotional intelligence, perceived stress, and different domains of coping strategies among young adult males and females residing in Kolkata. A total of 80 participants (40 males and 40 females) from Kolkata were assessed using standardized scales—the Schutte Self-Report Emotional Intelligence Test (SSEIT), Perceived Stress Scale (PSS), and the Brief COPE Scale. The findings revealed a significant negative correlation between emotional intelligence and perceived stress for both males and females, suggesting that individuals with higher EI tend to experience lower levels of stress. Additionally, a significant gender difference was found in emotional intelligence, with females scoring significantly higher than males. However, no significant difference was observed in perceived stress and self-distraction between genders.

Gender-based comparisons in coping strategies revealed notable differences. Females reported significantly higher use of active coping, emotional support, instrumental support, positive reframing, acceptance, and religious coping strategies. In contrast, males were more likely to engage in denial, substance use, behavioral disengagement, venting, planning, humor, and self-blame coping mechanisms. These findings highlight the protective role of emotional intelligence against stress and underscore the influence of gender on coping preferences. The results may inform gender-sensitive interventions that enhance emotional intelligence and promote adaptive coping strategies to improve psychological resilience and well-being.

Keywords*: emotional intelligence, perceived stress, coping strategies, gender differences, resilience, psychological well-being*

INTRODUCTION

In this increasingly complex and demanding world, people are continuously exposed to various stressors that threaten their psychological and emotional well-being. Commonly, it is seen that stress arises when an individual perceives an imbalance between the demands that are placed upon them and their available resources to cope (Lazarus & Folkman, 1984). The modern era has intensified the challenges due to rapid technological advancements, societal pressures, demands at work, and personal obligations. Prolonged exposure to stressors can harm one's physical and emotional well-being, leading to conditions like burnout, anxiety, depression, and cardiovascular diseases. However, the way we experience stress and its impact on our psychological health is not uniform; it differs greatly from person to person depending on their coping mechanisms and emotional intelligence (EI).

The way in which stress is viewed and managed is greatly influenced by an individual's emotional intelligence (EI), which is defined as their capacity to identify, comprehend, and control their emotions. Individuals with higher EI are frequently better at recognizing their emotional states, controlling their responses, and maintaining a balanced perspective even under pressure. This emotional control lessens the negative impacts of stress on their mental and physical health by enabling them to face hardship with increased resilience. Moreover, EI facilitates interpersonal relationships by enhancing communication, empathy, and conflict resolution skills, all of which contribute to a supportive social network that serves as a buffer against stress.

The relationship between stress and well-being is further mediated by coping strategies, which include the behavioral and cognitive measures people take to manage stress. Good coping strategies allow people to reinterpret difficulties, look for social support, and hone their problem-solving abilities, all of which lessen the negative effects of stress. However, unhealthy coping mechanisms like substance abuse or avoidance can make stress worse and have long-term detrimental effects.

Understanding the dynamic interconnection between emotional intelligence, perceived stress, and coping strategies is crucial for fostering resilience, promoting mental well-being, and enhancing adaptive functioning across various life domains.

Concept and meaning of the selected variables: -

I) EMOTIONAL INTELLIGENCE

Emotion can be defined as a complex disturbance in response to a personally significant event, which involves subjective experience, physiological changes, and behavioral expression (Lazarus, 1991). Intelligence is a multidimensional and intricate concept that has been operationally defined in different terms by psychologists over the years. Intelligence can be defined as the ability to judge well, to comprehend well, and to reason well (Binet, 1905). Intelligence can also be defined as the aggregate or global capacity of the individual to act purposefully, to think rationally, and to deal effectively with his environment (Wechsler, 1944). Robert Sternberg emphasized the ability to adjust, describing intelligence as the mental abilities necessary for adaptation to, as well as shaping and selection of, any environmental context (Sternberg, 1985). The notion of many intelligences was proposed by Howard Gardner; he defined intelligence as the ability to solve problems or to create products that are valued within one or more cultural settings (Gardner, 1983). Altogether, these definitions show that intelligence encompasses more than just academic aptitude; it also includes the ability to solve problems, be adaptable, and reason in a variety of real-world contexts.

A person's ability to manage relationships, life, and obstacles is not solely determined by their IQ; it is crucial to comprehend their emotional intelligence (EI) as well. While IQ (intellectual quotient) aids in learning, problem-solving, and rational thought, emotional intelligence (EI) focuses on comprehending and controlling our own emotions as well as those of others.

Here are some of the reasons why emotional intelligence (EI) matters beyond just intelligence:

1. **Improved relationships**: individuals with high EI can empathize with others, communicate effectively, and accurately perceive emotions, which fosters strong professional and personal relationships (Goleman, 1995). Research also indicates that emotional intelligence enhances one’s social competence, which is crucial for building meaningful interactions (Salovey & Mayer, 1990).

2. **Managing stress and challenges:** individuals with higher EI are better equipped to manage the various stressors that life presents us. While someone with a high IQ but low EI may struggle with emotional regulation, those with high EI can remain composed, adapt to challenges better, and make informed decisions under pressure (Lazarus &

Folkman, 1984). EI plays a vital role in stress appraisal and coping mechanisms, ultimately influencing our mental resilience (Zeidner, Matthews, & Roberts, 2009).

3. **Professional accomplishment:** Success in the workplace is not solely dependent on intelligence; teamwork, leadership, and emotional control are just as important. Employees with high EI are better at teamwork, motivation, and conflict resolution, which makes them effective leaders and colleagues (Boyatzis, Goleman, & Rhee, 2000). Studies also show that emotionally intelligent individuals excel in job performance and career advancement (Cherniss, 2010).

4. **Improved mental well-being:** burnout, sadness, and anxiety are associated with poor emotional regulation (Gross & John, 2003). Individuals with high EI can regulate their emotions better, reducing their vulnerability to stress-related disorders (Schutte et al., 1998). Emotionally intelligent people also exhibit greater psychological well-being, as they are better equipped to handle adversity (Bar-On, 2006).

5. **Improved decision-making capability:** Decision-making is greatly impacted by emotions. People with high EI are able to identify when their emotions are interfering with their judgment, which enables them to make much more balanced and logical decisions (Bechara, Damasio, & Damasio, 2000). Better problem-solving and critical thinking result from emotional control, which inhibits impulsive responses (Feldman Barrett & Gross, 2001).

6. **Self-awareness and personal growth:** A crucial element of emotional intelligence (EI), self-awareness helps people recognize their strengths and shortcomings, promoting ongoing development on both a personal and professional level (Goleman, 1998). Further research indicates that higher self-awareness leads to better self-regulation, motivation, and overall life satisfaction (Boyatzis, 2006).

In summary, emotional intelligence (EI) improves emotional adaptation, interpersonal skills, and resilience, whereas IQ aids in cognitive processing. Relationships, professional advancement, and mental health can all suffer from a lack of emotional intelligence. Because of its wide-ranging effects, emotional intelligence (EI) is an essential talent for success in both personal and professional spheres.

Emotional intelligence (EI) is the capacity to recognize, understand, manage, and influence emotions in oneself and others. Daniel Goleman (1995) brought the term into popular usage, describing it as the ability to recognize our own feelings and those of others, to motivate ourselves, and to manage emotions well in ourselves and in our

relationships. Similarly, Salovey and Mayer (1990), the authors who first used the term, described EI as the ability to monitor one's own and others' feelings and emotions, distinguish between them, and utilize this knowledge to inform one's thoughts and behavior.

Emotional intelligence is highly necessary to understand in the current fast life for effective communication, leadership, and sound mental health. With increased work stress, social tensions, and increased values placed on working in teams, EI allows one to effectively handle relationships, make good choices, and practice empathy. In a technological age and virtual world era, emotional intelligence also promises actual human connection, resilience, and mental well-being.

Numerous models have been created over the past three decades, and there are a number of ways of conceptualizing emotional intelligence. Emotional intelligence (EI) may be thought of as an ability. On the other hand, emotional intelligence (EI) may be thought of as a personality trait. Finally, one can think of emotional intelligence (EI) as a hybrid construct comprising both personality and abilities. Based on emotional intelligence theories, ability EI is a cognitive ability linked to emotions that can be developed and modified by training and intervention programs. Based on Petrides and Furnham (2001), trait EI theories conceptualize EI as a set of emotional perceptions located at the bottom levels of personality hierarchies. Finally, mixed theories of emotional intelligence hold that emotional intelligence is related to both personality traits and emotional skills.

Numerous significant facets of life are linked to emotional intelligence (EI). Indeed, emotional intelligence (EI) is a powerful predictor of IQ (Webb et al., 2013), health (Martins et al., 2010; Mikolajczak et al., 2015), romantic partner relationships (Malouff et al., 2014), job performance (O'Boyle et al., 2011), subjective well-being (Andrei et al., 2016), and social support (Goldenberg et al., 2006). However, loneliness (Webb et al., 2013) and sorrow (Anguiano-Carrasco et al., 2015) are adversely correlated with emotional intelligence (EI). Similarly, intervention programs and trainings can improve EI (Mikolajczak and Peña-Sarrionandia, 2015).

When it comes to managing stress-related issues, those with low emotional intelligence face several obstacles. This fact is supported by numerous studies that show a strong relationship between stress and emotional intelligence (Sharma and Kumar, 2016). Unmanaged stress is often associated with physical and mental health conditions that lead to psychological issues such as conflict, violence, and incompatibility. People who are under stress are unable to employ the appropriate positive techniques and strategies to lessen the negative effects of stress on their physical and mental health (Yousuf, 2007).

Emotional intelligence has a big impact on a person's capacity for positive social interaction (Bar-On, 2010). However, a variety of characteristics, including emotional competence, empathy, self-monitoring, and the severity and duration of an individual's discomfort, influence their capacity to cope in a stressful circumstance (Brink, 2009).

Emotionally intelligent children are happier, healthier, and more adaptable, all of which support their intended academic achievement (Epstein, 1998). It was found that low emotional intelligence skills are sometimes associated with social problems, school dropouts, anxiety, depression, a high aggression ratio, and a greater rate of violent crime and youth suicide. Since it influences how that individual manages his affairs, it is crucial to understand his personal competency, which mostly consists of self-awareness, self-regulation, and motivation (Goleman, 1995).

Core components of emotional intelligence (EI) include:

1) **Self-Awareness:** Self-awareness serves as the foundation of emotional intelligence, enabling individuals to recognize and understand their own emotions, desires, and moods and how these affect others (Goleman, 1995). This is also essential for personal growth, as it helps individuals identify what motivates them and brings fulfillment (Salovey & Mayer, 1990). Self-awareness fosters a deeper understanding of one's strengths and limitations, leading to improved decision-making and emotional regulation (Boyatzis, Goleman, & Rhee, 2000).

2) **Self-Regulation:** Self-regulation, often referred to as impulse control, is the ability to manage emotions and behaviors in various situations. It involves not only controlling immediate emotional reactions but also delaying or resisting impulsive actions in favor of more constructive responses (Goleman, 1998). Effective self-regulation contributes to emotional stability, allowing individuals to navigate challenges with composure and adaptability (Gross & John, 2003).

3) **Interpersonal Skills:** Interpersonal effectiveness encompasses the ability to build and maintain positive relationships through empathy, communication, and social cooperation (Bar-On, 2006). It involves being supportive, understanding the emotions of others, and fostering mutually satisfying relationships (Salovey & Mayer, 1990). Strong interpersonal skills contribute to teamwork, leadership, and social harmony (Cherniss, 2010).

4) **Adaptability:** this is the capacity to adjust thoughts, emotions, and behaviors in response to changing circumstances (Zeidner, Matthews, & Roberts, 2009). It enables individuals to effectively manage environmental demands, assess challenges, and

implement practical solutions (Caruso, Mayer, & Salovey, 2002). High adaptability is associated with greater resilience and problem-solving ability (Feldman Barrett & Gross, 2001).

5) **Stress Tolerance:** Stress tolerance refers to an individual's ability to withstand adversity, manage strong emotions, and remain composed under pressure (Schutte et al., 1998). Emotionally intelligent individuals use effective coping strategies to handle stress, reducing its negative impact on their mental and physical well-being (Lazarus & Folkman, 1984).

6) **Overall Motivation and Mood:** Emotional intelligence is supported by two key factors: optimism and happiness. Optimism allows individuals to focus on positive aspects of life and maintain motivation during difficult times, while happiness contributes to emotional well-being and satisfaction (Bar-On, 2006). A positive outlook enhances personal and professional growth, fostering resilience and long-term success (Fredrickson, 2001).

II) PERCEIVED STRESS

Stress is the body's psychological and physiological response to external or internal demands that exceed an individual's perceived ability to cope (Lazarus & Folkman, 1984). It occurs when a person perceives a situation as intimidating or overwhelming, which sets off an array of biological, emotional, and cognitive reactions (Selye, 1976). Although stress is a natural and frequently required aspect of life, prolonged and severe stress can result in a number of mental and physical health problems, such as anxiety, depression, heart problems, and compromised immunological function (Cohen, Kessler, & Gordon, 1997).

Among the several ways that stress is conceptualized, perceived stress—which refers to a person's subjective assessment of how overwhelming, unpredictable, and unmanageable life events appear—has become a crucial topic in health psychology (Cohen, Kamarck, & Mermelstein, 1983). The Perceived Stress Scale (PSS) is the most used instrument for assessing stress. Perceived stress is measured using self-reported measures, as opposed to physiological stress, which can be determined through biomarkers like cortisol levels (Cohen et al., 1983; Lee, 2012).

Cohen et al. (1983) first proposed the idea of perceived stress, which is a person's subjective assessment of environmental stresses and their capacity to manage them. Perceived stress places more emphasis on how a person perceives and reacts to external events than objective stress, which is more concerned with actual external events or

conditions. Depending on their coping mechanisms, emotional control, and cognitive assessment, two people in the same scenario may experience varying degrees of stress (Lazarus & Folkman, 1984). Because stress perception is subjective, it plays a critical role in comprehending the health consequences of stress.

Perceived stress is important since it is strongly linked to both physical and mental health consequences. Higher perceived stress levels have been repeatedly linked to an increased risk of anxiety, depression, cardiovascular disease, and compromised immunological function, according to studies (Slavich, 2016; Kivimäki & Steptoe, 2018). Additionally, long-term perceived stress can change the prefrontal cortex and amygdala, two brain regions involved in emotion regulation, which exacerbates stress-related diseases (McEwen, 2017).

Theoretical Perspectives on Perceived Stress

Lazarus and Folkman's (1984) Transactional Model of Stress and Coping is one of the most influential frameworks for understanding perceived stress. According to this model, stress arises from an interaction between environmental demands and an individual's appraisal of their ability to manage them. This model is based on two central cognitive processes: primary appraisal (evaluating the stressor) and secondary appraisal (evaluating the coping resources). These cognitive appraisals determine how an individual perceives and responds to stress. The primary appraisal involves evaluating whether an event is irrelevant, beneficial, or stressful. If an event is perceived as stressful, it is further categorized as:

- **Harm/Loss:** Damage has already occurred (e.g., loss of a loved one).
- **Threat:** Anticipation of potential harm (e.g., fear of failure in an exam).
- **Challenge:** A difficult situation that can be overcome with effort (e.g., preparing for a competition).

While the secondary appraisal focuses on assessing the resources available to cope with the stressor. If the individual perceives their resources as insufficient, they are more likely to experience high levels of stress.

Another important theoretical perspective is Selye's General Adaptation Syndrome (GAS), which divides the body's reaction to stress into three phases—alert, resistance, and exhaustion—another significant theoretical viewpoint (Selye, 1976). Prolonged activation of the stress response can result in physical health decline and emotional weariness when stress is viewed as excessive. These concepts were further developed by Cohen et al. (1983), who emphasized that individual characteristics like optimism, self-efficacy, and emotional intelligence affect how stressed a person feels.

Measurement and Impact of Perceived Stress

The Perceived Stress Scale (PSS) was created by Cohen et al. (1983) to measure how much people believe their lives are overwhelming, unpredictable, and out of control. With its high correlations between perceived stress and mental health outcomes, the PSS has been utilized extensively in psychological and health research (Cohen & Williamson, 1988). According to studies, those who perceive a lot of stress are more likely to experience anxiety, sadness, and even physical health problems such as immune system weakness and hypertension (Cohen et al., 1997).

Additionally, studies show that how people react to life's obstacles is greatly influenced by their perception of stress. It is a crucial variable in stress research since it mediates the link between psychological distress and environmental stressors (Lazarus, 1993). Additionally, elements including social support, emotional intelligence, and adaptive coping mechanisms might mitigate the consequences of perceived stress (Gross & John, 2003). Stress is generally viewed differently by people with high emotional intelligence, who frequently reframe obstacles as opportunities and employ useful coping strategies to lessen its effects (Zeidner, Matthews, & Roberts, 2009).

Relevance of Perceived Stress in Contemporary Life

Perceived stress has become an increasingly prevalent concern in today's fast-paced society because of rising work pressures, financial limitations, societal expectations, and technology improvements. Because people constantly compare themselves to others and deal with information overload, the growth of digital communication and social media has also led to higher stress levels (Misra & Stokols, 2012). Furthermore, the research of perceived stress is especially more important now since global catastrophes like the COVID-19 pandemic have increased stress levels globally (Holmes et al., 2020).

Interventions that focus on emotional regulation, resilience-building, and stress management approaches can be quite helpful in lowering stress levels because perceived stress is primarily subjective and impacted by cognitive and emotional variables. It has been demonstrated that emotional intelligence training, cognitive-behavioral therapy (CBT), and mindfulness-based therapies can assist people in reinterpreting stressors and creating more constructive coping mechanisms (Sharma & Rush, 2014).

For clinical psychologists, mental health specialists, and academics looking to enhance emotional resilience and well-being, an understanding of perceived stress is crucial.

Interventions can be designed to improve coping strategies and advance both mental and physical health by investigating the factors that underlie stress perception.

III) COPING STRATEGIES

Coping strategies are the behavioral and cognitive techniques people employ to control their emotions, deal with stress, and get through difficult circumstances (Lazarus & Folkman, 1984). Coping is essential to psychological well-being and mental health because it affects how people deal with hardship, bounce back from distressing experiences, and maintain overall resilience in general. The effectiveness of coping strategies depends on multiple factors, including personality traits, situational contexts, cultural backgrounds, and social support systems (Carver, Scheier, & Weintraub, 1989).

In psychology, the idea of coping has been thoroughly examined, especially in relation to stress and coping theories. According to Lazarus and Folkman's (1984) Transactional Model of Stress and Coping, coping is a dynamic process that involves two main types: emotion-focused coping, which tries to control the emotional impact of stressors, and problem-focused coping, which tries to change or eliminate the source of stress. While both forms of coping can be effective in different contexts, maladaptive coping strategies, such as avoidance or substance use, can contribute to poor mental health outcomes (Compas, Connor-Smith, Saltzman, Thomsen, & Wadsworth, 2001).

Researchers have created a number of instruments to evaluate coping mechanisms throughout time. The BRIEF COPE scale, created by Carver (1997), is among the most popular tools. A 28-item self-report survey called the BRIEF COPE was created to gauge a variety of coping reactions. Self-distraction, active coping, denial, substance use, emotional support, instrumental support, behavioral disengagement, venting, positive reframing, planning, humor, acceptance, religion, and self-blame are among its 14 subscales, each of which represents a different coping mechanism. These coping processes fall into two general categories: maladaptive (such as denial, substance abuse, and behavioral disengagement) and adaptive (such as active coping, planning, and positive reframing). The BRIEF COPE has been widely utilized in research on stress, mental health, and resilience across various populations, including clinical and non-clinical groups (Meyer, 2001; Kato, 2015).

Numerous studies emphasize how important coping mechanisms are for mental health outcomes. According to research by Taylor and Stanton (2007), people who use adaptive coping strategies like positive reframing and active coping report feeling less stressed and having more psychological resilience. In contrast, excessive anxiety, sadness, and

burnout have been associated with maladaptive coping mechanisms such as self-blame and avoidance (Nolen-Hoeksema, 2012; Aldao, Nolen-Hoeksema, & Schweizer, 2010).

Individuals' coping mechanisms also differ according to their gender. According to empirical data, men and women typically use distinct coping strategies while under stress. Men are more likely to employ problem-focused coping strategies like active coping and planning, whereas women are more likely to use emotion-focused coping strategies like venting, seeking emotional support, and positive reframing (Tamres, Janicki, & Helgeson, 2002). Furthermore, women are more likely to engage in self-blame and rumination, whereas men are more likely to utilize maladaptive coping mechanisms, including substance abuse and denial (Matud, 2004; Nolen-Hoeksema, 2000). These variations could be caused by biological, psychological, and societal elements that affect how people view and react to stress.

Designing successful mental health therapies requires an understanding of coping mechanisms. Mental health practitioners can create focused interventions to improve adaptive coping and lessen dependency on maladaptive techniques by understanding the coping processes that support resilience and well-being. Additionally, understanding how gender affects coping can assist in customizing interventions to meet the unique requirements of certain populations.

Types of Coping Strategies

- **Self-distraction**: Self-distraction is the process of focusing one's attention away from stressors to help to lower emotional tension. This could call for leisure pursuits, TV watching, or socializing (Carver, 1997). Studies indicate that although self-distraction can provide some respite, it may not be a long-term solution to effectively managing stress (Nielsen & Knardahl, 2014).

- **Active coping:** Active coping is directly acting to either eliminate or minimize stressors. This approach is related to proactive conduct and problem-solving ability. Active coping users are less prone to suffering from psychological discomfort and chronic stress, according to studies (Taylor & Stanton, 2007).

- **Denial:** Denial is a maladaptive coping mechanism whereby a person avoids recognizing a stressor and its effects. Though denial offers temporary emotional relief, it has been connected to undesirable psychological results, including greater susceptibility to anxiety and depression (Lazarus & Folkman, 1984; Carver, 1997).

- **Substance use:** Using drugs, alcohol, or another substance as a coping strategy means running away from tension. Negative health effects like addiction, poorer cognitive functioning, and more sensitivity to mental health problems are clearly linked to this approach (Cooper, Russell, & George, 1988).

- **Use of emotional support**: Seeking emotional support is seeking consolation and assurance from friends, family, or experts. Research shows that those with strong networks of emotional support are more resilient and have higher psychological health (Uchino, 2009).

- **Use of instrumental support:** Seeking out concrete help from others, whether financial aid, counsel, or practical assistance, is known as instrumental support. Because it makes problem-solving and stress reduction easier, this coping method is especially helpful in academic and professional contexts (Thoits, 2011).

- **Behavioral disengagement:** When someone lessens their efforts to cope with a stressor, it's known as behavioral disengagement, and it frequently results in emotions of powerlessness and withdrawal. Increased risks of burnout and depression are associated with this maladaptive technique (Nolen-Hoeksema, 2012).

- **Venting:** Venting is the act of releasing pent-up stress by expressing emotions, especially anger or irritation. Excessive venting without attempts to solve problems can exacerbate negative feelings and cause more suffering, even though it can offer momentary respite (Carver, 1997).

- **Positive reframing:** Reframing a stressful circumstance in a more positive way is known as positive reframing. According to research, those who practice positive reframing exhibit less stress and increased psychological resilience (Tugade & Fredrickson, 2004).

- **Planning:** Planning is a coping mechanism that involves coming up with solutions to deal with or get rid of a stressor. Increased self-efficacy and enhanced problem-solving abilities have been associated with this proactive approach (Aspinwall & Taylor, 1997).

- **Humor:** Humor is a coping strategy that uses amusement and laughter to defuse tense situations. According to research, humor can improve resilience, elevate mood, and lessen the symptoms of stress (Martin & Lefcourt, 1983).

- **Acceptance:** Acceptance means identifying a stressor and changing one's perspective to deal with it. Emotional resilience and well-being are positively connected with acceptance, especially when stresses are unchangeable (Hayes, Luoma, Bond, Masuda, & Lillis, 2006).

- **Religion:** Using spiritual activities and beliefs to find comfort and direction in times of stress is known as religion as a coping mechanism. Increased resilience, less anxiety, and higher life satisfaction have all been linked to religious coping (Pargament, 1997).

- **Self-blame:** Self-blame is a maladaptive coping strategy where individuals attribute negative outcomes to their own perceived failures or inadequacies. This strategy is linked to heightened risks of depression, anxiety, and low self-esteem (Nolen-Hoeksema, 2000).

  In summary, coping strategies are essential mechanisms that influence how individuals navigate stress and adversity, impacting their psychological well-being and resilience. By fostering resilience through effective coping, mental health professionals can enhance individuals' capacity to manage stress and promote overall psychological well-being.

RESEARCH GAP : Few studies have looked at the links between emotional intelligence (EI), perceived stress, and coping mechanisms in the Indian context, especially among young adults in Kolkata. The majority of the studies that have been done on these topics have been on Western populations. Research on how EI moderates or mediates the relationship between perceived stress and coping mechanisms, particularly among young Indian males and females, is lacking, despite the fact that gender variations in stress perception and coping have been studied. Furthermore, gendered coping strategies may be influenced differently in India by cultural and societal norms than in Western environments, although this is still poorly understood. With a sample of 40 males and 40 females, this study offers a targeted, localized examination, in contrast to the majority of previous studies that have used bigger or university-based samples.

By addressing these gaps, this research will contribute to a much more context-specific understanding of gender differences in EI, stress, and coping among young adults in Kolkata, helping to bridge the gap between global and Indian literature on the subject.

LITERATURE REVIEW

- The study looks at 104 peer-reviewed reviews and publications from 1998 to 2022 that were obtained from the Scopus and Web of Science databases. This in-depth examination highlights the growth and significance of emotional intelligence in a variety of fields. The study employs a hybrid or mixed review methodology that combines quantitative and qualitative analysis techniques. This dual methodology allows for a deeper understanding of the subject. The quantitative analysis indicates that empirical investigations make up the majority of the evaluated publications. The qualitative analysis separates the literature into broad themes and subcategories with a focus on emotional intelligence, leadership, and team dynamics. For instance, it makes a distinction between three subcategories in EI, seventeen in leadership, and nineteen in team dynamics. Leadership is a major theme, with emphasis placed on various forms, such as effective and transformative leadership. The review found that leaders with high emotional intelligence have a positive effect on team performance and employee attitudes toward work. It also draws attention to recent events like the COVID-19 pandemic, the Ukrainian conflict, and the application of artificial intelligence in business contexts. (Coronado-Maldonado & Benítez-Márquez, 2023)

- The importance of emotional intelligence (EI) in decision-making is getting more and more recognized in a variety of professional domains. Emotional intelligence (EI) and decision-making in the fields of neuroscience, artificial intelligence (AI), healthcare, business, education, and ethics are examined in this extensive literature review, which covers the years 2017–2023. The study conducts a systematic review of papers sourced from reputable sources such as Google Scholar, EBSCO, ProQuest, JGate, and Scopus using a qualitative research methodology. The results show that clinical decision-making, which is defined by better patient-centered care and ethical considerations, is enhanced when healthcare professionals have higher EI levels. Emotional intelligence (EI) competencies are linked to moral decision-making, successful leadership, and strong connections with clients. In the business and legal sectors, moral decision-making, effective leadership, and strong client relationships are all associated with emotional intelligence (EI) competencies. Emotionally intelligent educators create supportive learning environments that support both their students' emotional well-being and better pedagogical decisions. (Baranidharan & Dhakshayini, 2024)

- The authors carried out a systematic review to make sure the conclusions are supported by a careful examination of the body of existing literature, and after a careful search of numerous databases, they discovered eleven studies that satisfied their inclusion requirements. The importance of emotional intelligence (EI) in healthcare leadership is a topic of continuous discussion in this paper. It focuses on how EI can enhance job

performance and patient-centered care. According to the research, leaders who possess high emotional intelligence have a positive impact on workers' job satisfaction by fostering a supportive work environment that encourages dedication and lessens emotional exhaustion. This can help lower burnout rates among healthcare workers. The review concludes that high emotional intelligence fosters a more positive corporate culture and better teamwork. Teams led by individuals with higher emotional intelligence tend to be more empowered and proactive, which can enhance overall job performance. The authors highlight the limitations in the methodology of the studied research as well as the variability of reported results, despite the positive findings. These factors make it challenging to draw definitive conclusions. The study calls for further research into the connection between EI and patient satisfaction and suggests the development of EQ training programs, particularly for healthcare executives. Finally, this emphasizes the importance of emotional intelligence in healthcare leadership, its positive effects on employee satisfaction and organizational dynamics, and the need for additional research and education in this area. (Chaudry et al., 2024)

- This study examines the relationship between leadership effectiveness and emotional intelligence (EI) in Punjabi business managers. It seeks to comprehend the function of emotional intelligence (EI) in a number of domains, including employee motivation and retention, communication, and conflict resolution. In this study, 150 business managers from various industries were given questionnaires as part of a quantitative research approach. The researchers were able to collect numerical data using this method in order to examine the connection between leadership effectiveness and emotional intelligence. Three primary hypotheses were tested by the researchers using statistical methods such as ANOVA, regression, and correlation analyses. With a correlation coefficient of 0.78, the results showed a significant ($p < 0.01$) relationship between emotional intelligence and leadership effectiveness. One of the key findings is that as a leader's emotional intelligence increases, so does their ability to motivate employees, enhance organizational commitment, and improve employee retention. One of the main findings is that a leader's capacity to inspire workers, strengthen organizational commitment, and increase employee retention all improve with an increase in emotional intelligence. This implies that emotionally intelligent leaders foster a happier workplace, which is beneficial for both the team and the organization overall. According to this study, emotional intelligence plays a crucial role in effective leadership and is linked to improved teamwork, increased employee satisfaction, and overall organizational success. Leaders with high emotional intelligence are better able to manage their teams, according to data collected. Overall, this research underscores the critical role of emotional intelligence in leadership, suggesting that organizations should focus on developing this competency among their leaders to achieve better outcomes in team dynamics and employee engagement. (Ali et al., 2024)

- This paper begins by defining emotional intelligence (EI) as the ability to comprehend and control one's own emotions as well as those of others. This skill is crucial for effectively guiding ideas and actions in a range of situations, particularly in high-stress environments like the medical industry. It highlights how demanding the healthcare sector is, with long workdays and high emotional and patient demands. These conditions create a stressful work environment for healthcare professionals, including doctors, nurses, and paramedical staff. This study emphasizes how healthcare professionals must use strategies and interventions to effectively manage personal and professional stressors because doing so affects their overall health and performance. The main objective of the study is to find out how healthcare workers' capacity to control their stress levels is impacted by their emotional intelligence. It aims to provide useful methods and solutions for reducing stress. According to the description, the study is a comprehensive evaluation that examines the relationship between stress management strategies in various countries and emotional intelligence. The results show that healthcare professionals with higher emotional intelligence perform better and experience less stress. This suggests that emotional intelligence can have a significant impact on stress levels and overall job performance in the healthcare sector. The study's conclusion highlights the importance of developing emotional competencies, such as emotional awareness, self-regulation, motivation, empathy, and social skills. Eventually, these competencies, which are linked to higher productivity, job satisfaction, and lower stress levels, support the professional and personal development of healthcare workers. By highlighting the critical link between emotional intelligence and stress management in the healthcare sector, this paper emphasizes the need to develop emotional competency in order to improve the work-life balance of healthcare professionals. (Pradha & Soundarapandian, 2024)

- The aim of this study is to investigate the emotional intelligence and stress levels of Menoufia University nursing students. It looks into the coping mechanisms these students use and tries to comprehend how stress, emotional intelligence, and coping mechanisms are related. Emotional intelligence is highlighted as a crucial social skill that helps manage stress and enhances the ability to cope with various demands and pressures in the environment. This is particularly important for nursing students, who face unique challenges in their training and future careers. The study utilized a descriptive correlational research design, involving a simple random sample of 409 undergraduate nursing students. This design allows for the examination of relationships between variables without manipulating them. The three instruments that were used in this study are Schutte Self-Report Emotional Intelligence Test, Perceived Stress Scale, and the Coping Strategy Inventory. This study revealed that a significant portion of nursing students (73.4%) reported experiencing moderate to high levels of stress, despite having average or above-average emotional intelligence, and frequently used engagement

coping strategies rather than disengagement coping strategies. Notably, students with lower emotional intelligence (24.6%) tended to rely more on disengagement coping strategies. This study also found that older students exhibited higher emotional intelligence compared to younger students, and female students had higher emotional intelligence than male students. (El dahshan et al., 2020)

- The primary aim of the study was to explore the relationship between emotional intelligence and stress coping strategies among healthcare workers of a Third Level of Care Hospital during 2021. This study focuses on understanding how emotional intelligence can influence the way healthcare professionals manage stress. The researchers conducted an analytical cross-sectional study involving 290 health care workers. Two surveys were used in this study: the COPE test, which measures how to cope with stress, and the Bar-On Emotional Coefficient Inventory, which measures the level of emotional intelligence. The main variable was coping with stress. The findings revealed a significant positive correlation between emotional intelligence and stress coping strategies, with a Pearson correlation coefficient of 0.6003. This suggests that higher emotional intelligence is associated with more effective coping strategies. Among the coping strategies assessed, planning, positive reinterpretation and growth, and religious coping were identified as having the highest means. The correlations for these strategies with emotional intelligence were 0.5271, 0.5200, and 0.2051, respectively. Additionally, a multiple regression analysis indicated that for each point increase in the COPE test score, the average score on the BAR-ON test increased by 0.261 points after adjusting for other covariates. The study concluded that there is a significant relationship between emotional intelligence and stress coping strategies among health care workers. This finding emphasizes the importance of emotional intelligence in managing stress effectively in high-pressure environments like healthcare. (Zumaeta et al., 2023)

- The purpose of this study was to evaluate the relationship between emotional intelligence and stress management, particularly for students enrolled in particular medical faculties. The study included 730 students from the Medical University of Bialystok, indicating a large sample size that enhances the validity of the findings. The Coping Inventory for Stressful Situations (CISS), which evaluated coping strategies, and the Emotional Intelligence Questionnaire (INTE), which measured emotional intelligence, were the two main tools used to collect data. Aspiring nurses exhibited the least task-oriented coping style, according to the study, which might suggest that proactive stress management is more challenging for them. Students studying emergency medicine showed a lower emotional response to stress, which may indicate that they are resilient under pressure. The least avoidance-oriented coping style was shown by aspiring medical professionals, which may be a sign of a simpler approach to stress management. Results: Half of the students who participated in the survey had high emotional intelligence, whereas only a

small portion had average emotional intelligence. Students studying emergency medicine and medical analytics have the highest emotional intelligence, while women are more emotionally intelligent than men. In stressful situations, women tend to be more emotional, while men tend to be more task-oriented. Stress management training is recommended, especially for women. (Beck et al., 2023)

- The study focuses on the relationship between work-related stress and nurses' coping strategies and emotional intelligence. The study's goal is to assess how nurses' coping strategies and emotional intelligence relate to stress at work. This is important because emotionally intelligent healthcare professionals can advance their careers. A descriptive correlational research design was used to conduct the study in the critical care units of Benha University Hospital. Participants included a convenient sample of nurses with at least one year of experience. The Coping and Adaptation Processing Scale and the Emotional Intelligence Questionnaire were the two instruments utilized to gather data. These instruments aided in assessing the nurses' coping mechanisms and emotional intelligence levels. The results showed that a sizable portion of the nurses (92.9%) had high emotional intelligence. Furthermore, the majority of nurses (58%) stated that they used a lot of coping mechanisms to deal with work-related stress. The study discovered a statistically significant positive correlation between nurses' overall emotional intelligence and their coping mechanisms for handling stress at work. This suggests that nurses with higher emotional intelligence are more capable of managing stress. The authors recommend that nurses take part in ongoing educational and training programs to enhance their emotional intelligence and coping skills, as these are critical for effectively managing stress at work. (Mahmoud et al., 2023)

- This study's main goals were to investigate the relationship between emotional intelligence and teenage Taekwondo players' perceived performance and the role of stress coping strategies as a mediating factor. 472 young Taekwondo practitioners who are members of the Korea Taekwondo Association participated in the study by answering a survey. The data was processed using a variety of statistical techniques, such as frequency analysis, exploratory factor analysis, reliability analysis, correlation analysis, and multiple regression analysis. The participants' perceived performance, emotional intelligence, and stress management all showed positive associations, according to the study. It has been demonstrated that emotional intelligence partially improves perceived performance, suggesting that players with higher emotional intelligence typically perform better. Furthermore, the players' capacity to manage stress was positively impacted by emotional intelligence, indicating that emotionally intelligent people are more capable of managing stress. The study came to the conclusion that emotional intelligence and perceived performance are mediated by stress management. This indicates that emotional intelligence affects performance both directly and indirectly

through its influence on coping mechanisms for stress. The findings highlight the importance of emotional intelligence in enhancing athletic performance among youth Taekwondo players. Coaches and instructors are encouraged to recognize the significance of emotional intelligence and to implement tailored stress coping strategies to improve players' performance. (Kwon & Yang, 2024)

- This study defines emotional intelligence as the ability to manage negative emotions like stress, anxiety, and anger while promoting positive ones like empathy, patience, and confidence. The foundation for understanding how emotional intelligence (EI) can affect workplace dynamics and individual performance is laid out by this definition. It highlights how emotional intelligence significantly affects work-related outcomes, particularly in situations where employees may experience anxiety or uneasiness. This suggests that increasing employee well-being and productivity may be significantly influenced by emotional intelligence (EI). The paper defines coping styles as the various ways individuals handle emotional situations. These can include the strategies, plans, actions, and concepts employed to manage stress. Understanding coping styles is necessary to analyze how people respond to stress at work. Examining the relationship between coping strategies and emotional intelligence is the primary objective of the study. The study's objective is to determine how emotional intelligence (EI) can improve people's performance and stress management. The study employed standardized questionnaires on coping styles and emotional intelligence to collect primary data from a sample of 150 IT industry workers. Secondary data was also gathered from previously published research papers and journals in order to support the findings. The results indicated a somewhat positive association between coping strategies and emotional intelligence, with a correlation value of r =.42 and an R^2 value of R^2 =.18. This implies that although emotional intelligence (EI) has a positive impact on coping styles, other factors might also affect how people deal with stress in the work environment. (Gujral, 2013)

METHODS

AIM : The aim of this study is to explore the relationship between emotional intelligence, perceived stress, and different domains of coping strategies among young adults (male and female) residing in Kolkata.

OBJECTIVE :

- To determine if there is any significant relationship between emotional intelligence and perceived stress of male and female
- To determine if there is any significant difference between the means of male and female in terms of emotional intelligence
- To determine if there is any significant difference between the means of male and female in terms of perceived stress
- To determine if there is any significant difference between the means of male and female in terms of various domains of coping strategies

HYPOTHESIS :

1) H_0 - There is no significant correlation between emotional intelligence and perceived stress of females.
2) H_0 - There is no significant correlation between emotional intelligence and perceived stress of males
3) H_0 - there is no significant difference between the means of males and females emotional intelligence
4) H_0 - there is no significant difference between the means of males and females perceived stress
5) H_0 - there is no significant difference between the means of males and females in terms of self-distraction domain of coping strategy
6) H_0 - there is no significant difference between the means of males and females in terms of active coping domain of coping strategy
7) H_0 - there is no significant difference between the means of males and females in terms of denial domain of coping strategy
8) H_0 - there is no significant difference between the means of males and females in terms of substance use domain of coping strategy
9) H_0 - there is no significant difference between the means of males and females in terms of emotional support domain of coping strategy
10) H_0 - there is no significant difference between the means of males and females in terms of instrumental support domain of coping strategy

11) H_0 - there is no significant difference between the means of males and females in terms of behavioural disengagement domain of coping strategy
12) H_0 - there is no significant difference between the means of males and females in terms of venting domain of coping strategy
13) H_0 - there is no significant difference between the means of males and females in terms of positive reframing domain of coping strategy
14) H_0 - there is no significant difference between the means of males and females in terms of planning domain of coping strategy
15) H_0 - there is no significant difference between the means of males and females in terms of humor domain of coping strategy
16) H_0 - there is no significant difference between the means of males and females in terms of acceptance domain of coping strategy
17) H_0 - there is no significant difference between the means of males and females in terms of the religion domain of coping strategy
18) H_0 - there is no significant difference between the means of males and females in terms of self-blame domain of coping strategy

☐ **DESCRIPTION OF THE SAMPLE :** Males and females between the ages of 18 to 25 years residing in Kolkata.

☐ **SAMPLING TECHNIQUE :** Purposive sampling was done to collect data.

☐ **INCLUSION CRITERIA :**

- Only male and female genders were included in this study.
- Only those whose age falls between 18 and 25 were included in this study.
- Only those residing in and around Kolkata were included in this study.
- Only those with no history of psychological illness were included in this study.

☐ **EXCLUSION CRITERIA :**

- Participants other than male and female genders were not included in this study.
- Participants who have any psychological illness are not included in this study.

☐ **VARIABLES UNDER THE STUDY**

I. EMOTIONAL INTELLIGENCE : Emotional intelligence (EI) is defined as the ability to perceive, understand, regulate, and utilize emotions effectively in oneself and others to facilitate adaptive functioning (Schutte et al., 1998). It encompasses

recognizing emotional cues, managing emotional responses, and applying emotions in decision-making and problem-solving processes (Mayer & Salovey, 1997).

II. PERCEIVED STRESS : Perceived stress refers to the extent to which an individual appraises situations as stressful, unpredictable, uncontrollable, or overwhelming (Cohen & Williamson, 1988). It reflects subjective evaluations of stressors rather than the objective presence of stress, emphasizing the role of cognitive appraisal in stress experiences (Lazarus & Folkman, 1984).

III. COPING STRATEGIES : Coping strategies refer to the cognitive and behavioral efforts employed by individuals to manage internal or external stressors that exceed their personal resources (Carver, 1997). These strategies can be adaptive or maladaptive and influence how effectively individuals respond to stressful experiences (Folkman & Lazarus, 1988).

Types of coping strategies studied in this study :

- **Self-distraction**: Self-distraction is the process of focusing one's attention away from stressors to help to lower emotional tension. This could call for leisure pursuits, TV watching, or socializing (Carver, 1997).
- **Active coping:** Active coping is directly acting to either eliminate or minimize stressors. This approach is related to proactive conduct and problem-solving ability (Taylor & Stanton, 2007).
- **Denial:** Denial is a maladaptive coping mechanism whereby a person avoids recognizing a stressor and its effects. Though denial offers temporary emotional relief, it has been connected to undesirable psychological results, including greater susceptibility to anxiety and depression (Lazarus & Folkman, 1984; Carver, 1997).
- **Substance use:** Using drugs, alcohol, or another substance as a coping strategy means running away from tension. (Cooper, Russell, & George, 1988).
- **Use of emotional support**: Seeking emotional support is seeking consolation and assurance from friends, family, or experts. (Uchino, 2009).
- **Use of instrumental support:** Seeking out concrete help from others, whether financial aid, counsel, or practical assistance, is known as instrumental support. (Thoits, 2011).
- **Behavioral disengagement:** When someone lessens their efforts to cope with a stressor, it's known as behavioral disengagement, and it frequently results in emotions of powerlessness and withdrawal. (Nolen-Hoeksema, 2012).
- **Venting:** Venting is the act of releasing pent-up stress by expressing emotions, especially anger or irritation. (Carver, 1997).

- **Positive reframing:** Reframing a stressful circumstance in a more positive way is known as positive reframing. (Tugade & Fredrickson, 2004).
- **Planning:** Planning is a coping mechanism that involves coming up with solutions to deal with or get rid of a stressor. (Aspinwall & Taylor, 1997).
- **Humor:** Humor is a coping strategy that uses amusement and laughter to defuse tense situations. (Martin & Lefcourt, 1983).
- **Acceptance:** Acceptance means identifying a stressor and changing one's perspective to deal with it. (Hayes, Luoma, Bond, Masuda, & Lillis, 2006).
- **Religion:** Using spiritual activities and beliefs to find comfort and direction in times of stress is known as religion as a coping mechanism. (Pargament, 1997).
- **Self-blame:** Self-blame is a maladaptive coping strategy where individuals attribute negative outcomes to their own perceived failures or inadequacies. (Nolen-Hoeksema, 2000).

☐ TOOLS USED IN THIS STUDY :

The description of the tools which were used in the study is mentioned below

- INFORMED CONSENT FORM : With the information consent form, the participants were informed about the purpose of this research, what they will be asked to do in this research, risks and discomfort, benefits of the research and how it will be beneficial for the participants, and the promise to maintain confidentiality about each and every piece of information and data that participants will share.

- INFORMATION SCHEDULE : A sociodemographic sheet was provided to collect name, gender, educational qualification, age, mother tongue, and their residence. Participants were also asked if they had any history of psychiatric or physical illness.

- DESCRIPTION OF THE SCALES USED :-
  I. The Schutte Self Report Emotional Intelligence Test (SSEIT)

Emotional intelligence was measured using a scale developed by Schuttle et.al., (1998). The scale comprises 33 items, three of which are reverse scored. Participants are required to rate the extent to which they agree or disagree with each statement on a five-point scale (1 = strongly disagree; 5 = strongly agree). The score is calculated by summing the item responses. The Schutte Self-Report Emotional Intelligence Test (SSEIT) is a reliable and valid measure of emotional intelligence. It has been shown to have good internal consistency, test-retest reliability, and construct validity. This test has high internal consistency with a coefficient alpha of 0.90. The test-retest reliability

is also good, with a correlation coefficient of 0.78. The construct validity of this test is also impressive, as it has been shown to correlate with other measures of emotional intelligence, such as the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT).

II. Perceived stress scale (PSS)

The perceived stress of the participants was measured using the Perceived Stress Scale (PSS). This 10-item scale has been used extensively in health research and was created to gauge how stressful people perceive their lives to be. The scale uses a 5-point Likert response format, and four of the items have reversed scores. Responses are added up to determine the final score. Higher scores on the PSS indicate higher perceived stress. Individual scores range from 0 to 40. This scale's Cronbach's alpha varies between 0.74 and 0.91 depending on the population.

III. Brief COPE Scale

The Brief-COPE is a 28-item self-report questionnaire designed to measure effective and ineffective ways to cope with a stressful life event. The scale can determine someone’s primary coping styles as either approach coping or avoidant coping. In addition, the following subscales are reported: self-distraction, active coping, denial, substance use, use of emotional support, use of instrumental support, behavioral disengagement, venting, positive reframing, planning, humor, acceptance, religion, & self-blame. The internal consistency (Cronbach's alpha) of the subscales varies:

- Active Coping: 0.68
- Planning: 0.73
- Positive Reframing: 0.64
- Acceptance: 0.57
- Humor: 0.73
- Religion: 0.82
- Using Emotional Support: 0.71
- Using Instrumental Support: 0.64
- Self-Distraction: 0.71
- Denial: 0.54
- Venting: 0.50
- Substance Use: 0.90
- Behavioral Disengagement: 0.65
- Self-Blame: 0.69

These values indicate varying levels of internal consistency across the subscales, with some demonstrating higher reliability than others. In terms of validity, the Brief COPE

has undergone various psychometric evaluations across different populations. For instance, a study involving Chilean participants confirmed the scale's construct validity, supporting its use in diverse cultural contexts. Additionally, the scale has been validated in multiple languages, including Spanish, Korean, and French, further attesting to its cross-cultural applicability.

☐ PROCEDURE

Participants (N = 80; male = 40, female = 40) of the present study were selected by purposive sampling. The researcher has only selected those participants who came forward on their own to participate. Written consent was obtained from the participants after informing them about the nature of the study, benefits, potential risks, and promise of confidentiality. A sociodemographic sheet was also provided to collect the name, age, gender, sex, educational qualification, mother tongue, residence, and contact information of the participant. They were also asked if they had any history of physical or psychological illness. Certain responses were also discarded based on the exclusion criteria of this study so that they didn't make any impact on the variables of this study.

☐ STATISTICAL ANALYSIS

IBM Statistical Package for the Social Sciences **(**SPSS) version 25 was used for statistical analysis of the data.

The following statistical treatments were done: mean, standard deviation (SD), Spearman rank correlation, and independent sample Mann-Whitney U test.

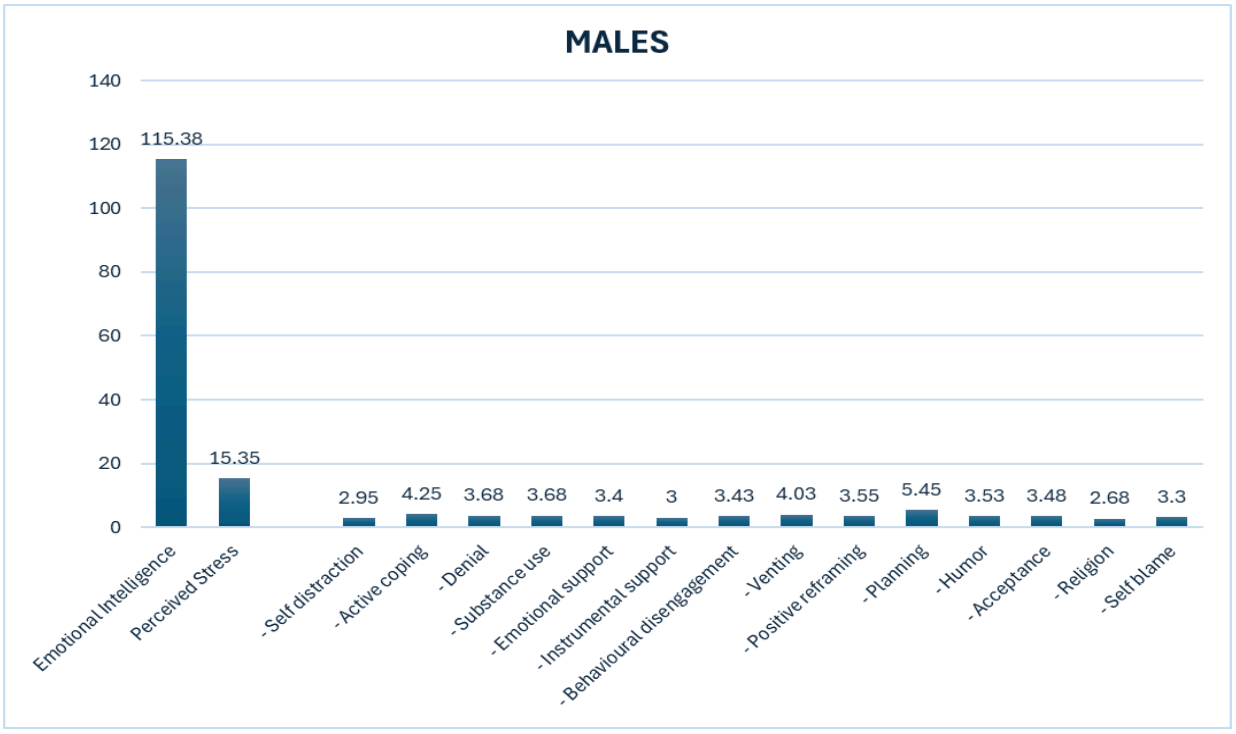
RESULTS

DESCRIPTIVE STATISTICS

This table shows the value of the mean and SD of males and females for emotional intelligence, perceived stress, and different domains of coping strategies.

VARIABLES	**MALES (N=40)**		**FEMALES (N=40)**	
	MEAN	SD	MEAN	SD
Emotional intelligence	115.38	11.639	121.75	9.139
Perceived stress	15.35	3.093	15.43	3.194
Coping strategies				
- Self-distraction	2.95	1.300	3.43	1.338
- Active coping	4.25	1.794	6.10	1.464
- Denial	3.68	1.575	2.45	.639
- Substance use	3.68	1.639	2.80	1.203
- Emotional support	3.40	1.464	4.93	1.845
- Instrumental support	3.00	1.198	4.70	1.814
- Behavioural disengagement	3.43	1.517	2.58	.903
- Venting	4.03	1.833	2.90	1.150
- Positive reframing	3.55	1.431	5.90	1.499
- Planning	5.45	1.679	4.65	1.424
- Humor	3.53	1.396	2.50	.679
- Acceptance	3.48	1.198	6.73	1.219
- Religion	2.68	1.047	4.93	1.685
- Self-blame	3.30	1.285	2.65	.893

GRAPHICAL REPRESENTATION



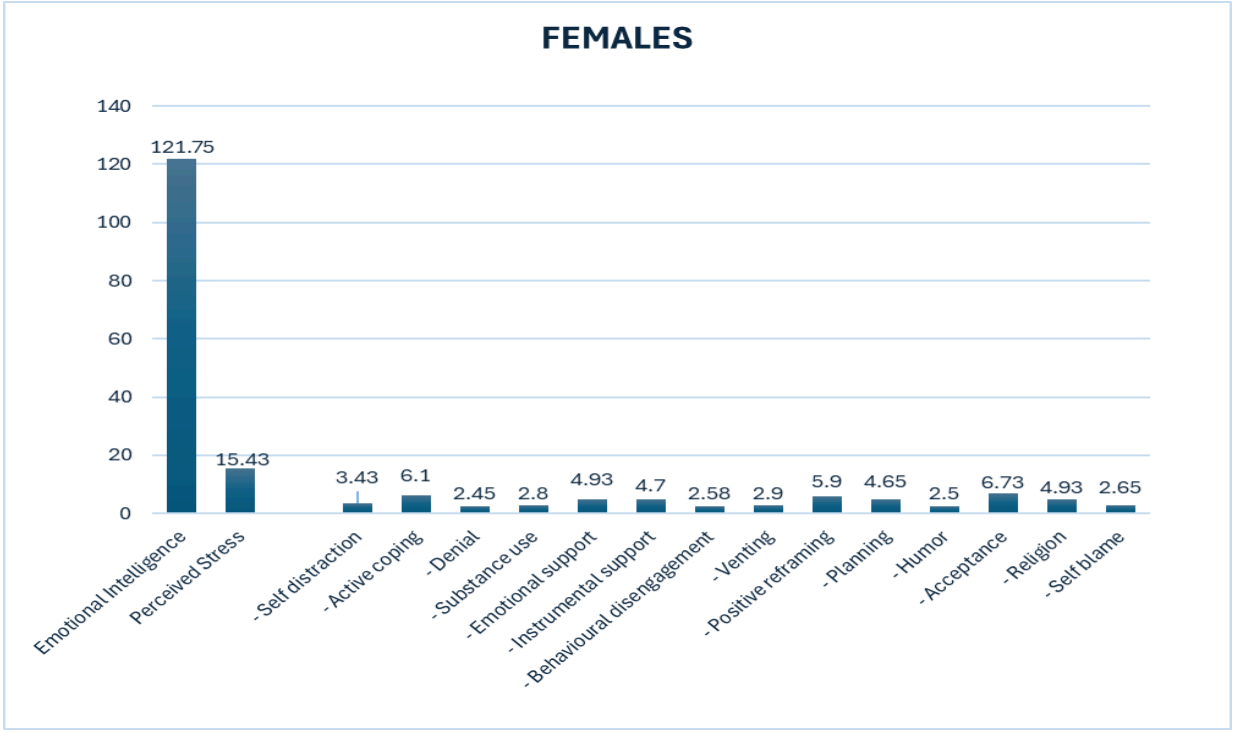


TABLE 1 : Showing correlation value between female emotional intelligence and perceived stress

	PERCEIVED STRESS	
	Correlational Value	Significant Value
EMOTIONAL INTELLIGENCE	-.732 **	.000

** correlation is significant at the 0.01 level (2-tailed)

There is a significant correlation between emotional intelligence and perceived stress of females. Hence, the alternate hypothesis (H_1) is accepted.

TABLE 2: Showing correlation value between male emotional intelligence and perceived stress

	PERCEIVED STRESS	
	Correlational Value	Significant Value
EMOTIONAL INTELLIGENCE	-.806**	.000

** correlation is significant at the 0.01 level (2-tailed)

There is a significant correlation between emotional intelligence and perceived stress of males. Hence, the alternate hypothesis (H_1) is accepted.

TABLE 3 : Showing the value of independent sample Mann-whitney U for emotional intelligence across the gender

	EMOTIONAL INTELLIGENCE
Mann-Whitney U	544.000
Z	-2.468
Asymp. Sig. (2-tailed)	.014

There is a significant difference between male and female emotional intelligence; hence, the alternate hypothesis (H_1) is accepted.

TABLE 4 : Showing the value of independent sample Mann-Whitney U for perceived stress across the gender

	PERCEIVED STRESS
Mann-Whitney U	776.500
Z	-.228
Asymp. Sig. (2-tailed)	.820

There is no significant difference between male and female perceived stress; hence, the null hypothesis (H_0) is accepted.

TABLE 5: Showing the value of independent sample Mann-Whitney U for Self-distraction domain of coping strategy across the gender

	SELF-DISTRACTION
Mann-Whitney U	627.000
Z	-1.762
Asymp. Sig. (2-tailed)	.078

There is no significant difference between male and female in terms of the self-distraction domain of coping strategy; hence, the null hypothesis (H_0) is accepted.

TABLE 6: Showing the value of independent sample Mann-Whitney U for active coping domain of coping strategy across the gender

	ACTIVE COPING
Mann-Whitney U	344.500
Z	-4.484
Asymp. Sig. (2-tailed)	.000

There is a significant difference between male and female in terms of the active coping domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 7: Showing the value of independent sample Mann-Whitney U for denial domain of coping strategy across the gender

	DENIAL
Mann-Whitney U	429.500
Z	-3.812
Asymp. Sig. (2-tailed)	.000

There is a significant difference between male and female in terms of the denial domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 8: Showing the value of independent sample Mann-Whitney U for substance use domain of coping strategy across the gender

	SUBSTANCE USE
Mann-Whitney U	554.500
Z	-2.543
Asymp. Sig. (2-tailed)	.011

There is a significant difference between male and female in terms of the substance use domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 9: Showing the value of independent sample Mann-Whitney U for emotional support domain of coping strategy across the gender

	EMOTIONAL SUPPORT
Mann-Whitney U	419.000
Z	-3.736
Asymp. Sig. (2-tailed)	.000

There is a significant difference between male and female in terms of the emotional support domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 10: Showing the value of independent sample Mann-Whitney U for instrumental support domain of coping strategy across the gender

	INSTRUMENTAL SUPPORT
Mann-Whitney U	366.500
Z	-4.311
Asymp. Sig. (2-tailed)	.000

There is a significant difference between male and female in terms of the instrumental support domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 11: Showing the value of independent sample Mann-Whitney U for behavioural disengagement domain of coping strategy across the gender

	BEHAVIOURAL DISENGAGEMENT
Mann-Whitney U	554.500
Z	-2.569
Asymp. Sig. (2-tailed)	.010

There is a significant difference between male and female in terms of the behavioral disengagement domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 12: Showing the value of independent sample Mann-Whitney U for venting domain of coping strategy across the gender

	VENTING
Mann-Whitney U	525.000
Z	-2.763
Asymp. Sig. (2-tailed)	.006

There is a significant difference between male and female in terms of the venting domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 13: Showing the value of independent sample Mann-Whitney U for positive reframing domain of coping strategy across the gender

	POSITIVE REFRAMING
Mann-Whitney U	218.500
Z	-5.669
Asymp. Sig. (2-tailed)	.000

There is a significant difference between male and female in terms of the positive reframing domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 14: Showing the value of independent sample Mann-Whitney U for planning domain of coping strategy across the gender

	PLANNING
Mann-Whitney U	598.000
Z	-2.040
Asymp. Sig. (2-tailed)	.041

There is a significant difference between male and female in terms of the planning domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 15: Showing the value of independent sample Mann-Whitney U for humor across the gender

	HUMOR
Mann-Whitney U	462.000
Z	-3.485
Asymp. Sig. (2-tailed)	.000

There is a significant difference between male and female in terms of the humor domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 16: Showing the value of independent sample Mann-Whitney U for acceptance domain of coping strategy across the gender

	ACCEPTANCE
Mann-Whitney U	61.000
Z	-7.265
Asymp. Sig. (2-tailed)	.000

There is a significant difference between male and female in terms of the acceptance domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted

TABLE 17: Showing the value of independent sample Mann-Whitney U for religion domain of coping strategy across the gender

	RELIGION
Mann-Whitney U	225.500
Z	-5.815
Asymp. Sig. (2-tailed)	.000

There is a significant difference between male and female in terms of the religion domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

TABLE 18: Showing the value of independent sample Mann-Whitney U for self-blame domain of coping strategy across the gender

	SELF BLAME
Mann-Whitney U	580.000
Z	-2.329
Asymp. Sig. (2-tailed)	.020

There is a significant difference between male and female in terms of the self-blame domain of coping strategy; hence, the alternate hypothesis (H_1) is accepted.

DISCUSSION

This present study is aimed at exploring the relationship between emotional intelligence, perceived stress and different domains of coping strategies among young adults residing in Kolkata. The results provided significant insights into the role of emotional intelligence in stress perception and the coping mechanisms adopted by males and females.

Relationship Between Emotional Intelligence and Perceived Stress

Emotional Intelligence (EI) refers to the ability to perceive, understand, manage, and regulate emotions effectively, while perceived stress reflects how individuals interpret and respond to stressors in their lives. A strong inverse relationship between EI and perceived stress suggests that individuals with higher emotional intelligence are better equipped to handle stress, leading to improved psychological well-being. This study found a significant negative correlation between EI and perceived stress for both males and females, indicating that individuals with higher emotional intelligence tend to experience lower perceived stress. This finding aligns with previous research suggesting that individuals with higher emotional intelligence cope better with stressful situations, leading to lower levels of perceived stress, which in turn contributes to their overall well-being. This study also suggests that emotional intelligence can help individuals cope with stress more effectively, leading to a more satisfying life. (Urquijo et al., 2016)

Gender Differences in Emotional Intelligence

A significant difference was observed in this study between the emotional intelligence of males and females, with females scoring higher on EI. This result is consistent with prior literature, which suggests that females tend to exhibit greater emotional intelligence as compared to males. This suggests that gender may influence emotional intelligence, with females potentially having more developed emotional skills or awareness. (Das & Sahu, 2015) Women are often more adept at recognizing and processing emotional cues, which contributes to their higher EI scores (Petrides & Furnham, 2000).

Gender Differences in Perceived Stress

No significant difference was found in this study in the perceived stress levels between males and females. This finding contrasts with some studies indicating that females tend to report higher stress levels due to greater emotional reactivity and societal pressures (Matud, 2004). However, it is also possible that males and females experience stress differently, with females engaging in more expressive coping

mechanisms while males may underreport their stress due to gender norms (Tamres, Janicki, & Helgeson, 2002)

Gender Differences in Coping Strategies

This study examined multiple coping strategies and found significant gender differences in various domains. Females were found to use active coping, emotional support, instrumental support, positive reframing, acceptance, and religious coping more frequently than males. Conversely, males exhibited higher usage of denial, substance use, behavioral disengagement, venting, planning, humor, and self-blame coping strategies.

I. ACTIVE COPING

Active coping refers to directly acting to either eliminate or minimize stressors, and this approach is related to proactive conduct and problem-solving ability. The results of this study indicate that females use this coping more than males, though previous research suggests that females use active coping, expressive support seeking, and avoidance more equally than men. (Jun & Yeo, 2013) Active coping strategies contribute to resilience and well-being by facilitating effective problem-solving and adaptive responses (Carver, Scheier, & Weintraub, 1989).

II. DENIAL AND SUBSTANCE USE

Denial is a maladaptive coping mechanism whereby a person avoids recognizing a stressor and its effects, and substance use is a form of coping mechanism where a person uses drugs, alcohol, or other substances to run away from tension. Both these coping strategies offer temporary emotional relief; they have been connected to undesirable psychological results, including greater susceptibility to anxiety and depression (Lazarus & Folkman, 1984; Carver, 1997). The results of this study indicate that males have a higher reliance on denial and substance use as coping mechanisms. This supports findings from previous studies showing that males are more likely to resort to substance use as a coping mechanism. Studies also show that men engage in higher levels of substance use than women, particularly in stressful situations (Panknin, 2019). Males also exhibit a greater tendency to use denial as a coping strategy. This was evidenced in a study where avoidant coping strategies, including denial, were linked to increased psychological distress among men (Livingston et al., 2022). These strategies may provide temporary relief but are often maladaptive in the long run, leading to increased psychological distress (Lazarus & Folkman, 1984).

III. EMOTIONAL AND INSTRUMENTAL SUPPORT

Emotional support involves empathy, care, and reassurance from others, while instrumental support refers to practical help or tangible assistance provided during stressful times. From the results of this study, it can be said that females use emotional and instrumental support as coping more than males. Previous studies have also supported this finding. Women are significantly more likely to seek emotional support during stressful situations. For instance, studies show that women reported higher usage of emotional support strategies compared to men, particularly during the COVID-19 pandemic (Cholankeril et al., 2023). Females also demonstrate a greater tendency to seek instrumental support. Research indicates that women are more inclined to use social support as a coping strategy, while men often resort to problem-focused or avoidant coping (Grigienė, 2016). Conversely, while men may not actively seek social support, it remains a crucial resource for them, suggesting that both genders value emotional support, albeit in different ways (Grigienė, 2016).

IV. BEHAVIORAL DISENGAGEMENT AND VENTING

When someone lessens their efforts to cope with a stressor, it's known as behavioral disengagement, and it frequently results in emotions of powerlessness and withdrawal. Whereas venting is the act of releasing pent-up stress by expressing emotions, especially anger or irritation. In this study, males scored higher on both behavioral disengagement and venting. This result is consistent with the findings of previous studies that show that men often resort to behavioral disengagement as a coping strategy, particularly in high-stress situations. Men reportedly utilize venting more frequently, which can lead to emotional turmoil and potential suicidal thoughts (Медведева et al., 2024). In contrast, women tend to employ more emotion-focused coping strategies, such as seeking social support and using positive reinterpretation, rather than disengagement (Hasan et al., 2022)

V. POSITIVE REFRAMING AND ACCEPTANCE

Reframing a stressful circumstance in a more positive way is known as positive reframing, and acceptance means identifying a stressor and changing one's perspective to deal with it. In this study, females scored significantly higher in positive reframing and acceptance. Previous studies have also shown that females use positive reframing and acceptance significantly more than males. This emotion-focused coping was associated with lower anxiety levels for women, highlighting gender differences in coping strategies. (Cholankeril et al., 2023). The use of positive reframing is associated with lower levels of depressive symptoms in women, highlighting its importance in mental health management (Kelly et al., 2008).

VI. PLANNING AND HUMOR

Planning is a coping mechanism that involves coming up with solutions to deal with or get rid of a stressor, and humor is a coping strategy that uses amusement and laughing to defuse tense situations. In this study, males have scored significantly higher in planning and humor. Previous studies have also supported the fact that men tend to use problem-focused coping strategies. This means they prefer to tackle problems directly through planning, rational actions, positive thinking, personal growth, humor, and even daydreaming or fantasizing. In contrast, women are more inclined to use emotion-focused coping strategies. This includes expressing emotions, seeking social support, and wishful thinking. (Vingerhoets & van Heck, 1990)

VII. RELIGION AND SELF-BLAME

Using spiritual activities and beliefs to find comfort and direction in times of stress is known as religion as a coping mechanism, and self-blame is a maladaptive coping strategy where individuals attribute negative outcomes to their own perceived failures or inadequacies. In this study, females exhibited higher religious coping, whereas males showed greater self-blame tendencies. Previous studies also highlighted the fact that women are generally more religious than men and more likely to use religious coping. (Hvidtjørn et al., 2014). Women's religious coping is positively correlated with their mental health adaptation, particularly in stressful situations like cancer treatment (Murken et al., 2010). This suggests that religious coping serves as a significant support mechanism for women. Research also indicates that males exhibit greater tendencies toward self-blame, particularly in contexts involving sexual violence and psychological distress. Studies have shown that a significant majority of male survivors of sexual violence report self-blame, with 93% acknowledging some level of it, often linked to factors such as rape myth acceptance and substance use (Witherspoon et al., 2024). Additionally, men experiencing sexual dysfunction, such as premature ejaculation, demonstrate higher self-blame compared to those with erectile dysfunction, suggesting that sexual problems exacerbate self-attribution of negative experiences (Rowland et al., 2016)

CONCLUSION

This study provides compelling evidence of the intricate interplay between emotional intelligence, perceived stress, and gender-specific coping strategies. The significant negative correlation between emotional intelligence and perceived stress in both males and females supports the fact that higher EI acts as a buffer against stress. Additionally, the marked gender difference in emotional intelligence, with females scoring higher, underscores the emotional strengths often attributed to women, including empathy, emotional regulation, and social sensitivity.

Interestingly, although emotional intelligence differed significantly between genders, perceived stress levels did not, suggesting that both genders experience stress similarly but may manage and express it differently. This divergence is further reflected in the gender-specific coping strategies identified in the study. Females predominantly engaged in adaptive coping mechanisms such as active coping, positive reframing, acceptance, and seeking social and religious support. In contrast, males showed a greater tendency to resort to avoidant and potentially maladaptive strategies like denial, substance use, behavioral disengagement, venting, and self-blame, though they also utilized planning and humor more than females.

These findings highlight the importance of developing targeted interventions aimed at enhancing emotional intelligence and encouraging adaptive coping strategies, especially among males who may be more inclined toward maladaptive responses. Future research could further explore the underlying psychological and sociocultural factors that influence these gendered patterns in coping and resilience. Overall, this study reinforces the critical role of emotional intelligence in stress management and the necessity of gender-sensitive approaches to psychological support and well-being.

LIMITATION

While this study offers valuable insights into the relationship between emotional intelligence, perceived stress, and coping strategies across genders, its findings are limited by factors such as a small, geographically restricted sample, reliance on self-report measures, and a cross-sectional design. Additionally, the study did not account for potential confounding variables or include gender-diverse participants, and cultural influences specific to Kolkata may affect the generalizability of the results.

IMPLICATIONS

This study highlights the importance of emotional intelligence (EI) in managing stress and reveals gender-based differences in coping strategies. These findings suggest :

- EI training can help individuals better manage stress.
- Gender-sensitive approaches in mental health programs are essential, as males and females use different coping methods.
- Educational institutions and workplaces can incorporate stress management and EI workshops.
- Counselors and therapists can tailor interventions based on clients' coping styles and gender.
- The study also encourages future research on EI and coping across diverse populations.

FUTURE RECOMMENDATION

Future research should involve larger and more diverse samples, adopt longitudinal designs to track changes over time, and explore intervention-based approaches like EI training. Including additional psychological variables and using qualitative methods can offer deeper insights, while cross-cultural studies may reveal how cultural factors shape emotional intelligence and coping.

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APPENDICES

INFORMED CONSENT FORM FOR PARTICIPATION ADDRESSING THE PARTICIPANTS

Purpose of this research: This independent study is being conducted as a part of my dissertation of Postgraduate course, M.Sc in Applied Psychology, Sister Nivedita University. The purpose of this study is to explore certain psychological aspects.

What will you be asked to do in this research : If you volunteer to participate, you will be asked to respond to some questions. No identification details of the participants will be revealed.

Risks and Discomforts: No potential risk or discomfort from your participation in the research work is foreseen.

Benefit of the research and benefit to you : This study will not bring you specific benefits outside of an opportunity to share your views and opinions. Your participation, however, will be of considerable benefit solely for the purpose of research and advancement of knowledge in the field.

Voluntary participation: Your participation in the study is completely voluntary and you may refuse to answer any question or choose to stop participation at any time without any penalty. Your decision not to volunteer will not influence your relationship with the researcher.

Confidentiality : All information you supply during the research will be held in confidence and unless you specifically indicate your consent, your name will not appear in any report or publication of the research. Your data will be safely stored in a locked facility and only the researcher will have access to this information. Confidentiality will be provided to the fullest extent.

I consent to participate in the study

Signature of the participant -
Date -

THANK YOU FOR YOUR PARTICIPATION

DETAILS OF THE PARTICIPANTS

NAME -
SEX -
GENDER -
AGE-
MOTHER TONGUE -
EDUCATION -
CONTACT INFORMATION -
RESIDENCE -

Any history of psychiatric illness -
Any history of physical illness -

QUESTIONNAIRE 1

Instructions: Indicate the extent to which each item applies to you using the following scale:
1 = strongly disagree
2 = disagree
3 = neither disagree nor agree
4 = agree
5 = strongly agree

1. I know when to speak about my personal problems to others
2. When I am faced with obstacles, I remember times I faced similar obstacles and overcame them
3. I expect that I will do well on most things I try
4. Other people find it easy to confide in me
5. I find it hard to understand the non-verbal messages of other people*
6. Some of the major events of my life have led me to re-evaluate what is important and not important
7. When my mood changes, I see new possibilities
8. Emotions are one of the things that make my life worth living
9. I am aware of my emotions as I experience them
10. I expect good things to happen
11. I like to share my emotions with others
12. When I experience a positive emotion, I know how to make it last
13. I arrange events others enjoy
14. I seek out activities that make me happy
15. I am aware of the non-verbal messages I send to others
16. I present myself in a way that makes a good impression on others
17. When I am in a positive mood, solving problems is easy for me
18. By looking at their facial expressions, I recognize the emotions people are experiencing
19. I know why my emotions change
20. When I am in a positive mood, I am able to come up with new ideas
21. I have control over my emotions
22. I easily recognize my emotions as I experience them
23. I motivate myself by imagining a good outcome to tasks I take on
24. I compliment others when they have done something well
25. I am aware of the non-verbal messages other people send
26. When another person tells me about an important event in his or her life, I almost feel as though I have experienced this event myself

27. When I feel a change in emotions, I tend to come up with new ideas
28. When I am faced with a challenge, I give up because I believe I will fail*
29. I know what other people are feeling just by looking at them
30. I help other people feel better when they are down
31. I use good moods to help myself keep trying in the face of obstacles
32. I can tell how people are feeling by listening to the tone of their voice
33. It is difficult for me to understand why people feel the way they do*

QUESTIONNAIRE 2

The questions in this scale ask about your feelings and thoughts during the last month. In each case, you will be asked to indicate how often you felt or thought a certain way. Although some of the questions are similar, there are differences between them and you should treat each one as a separate question. The best approach is to answer fairly quickly. That is, don't try to count up the number of times you felt a particular way; rather, indicate the alternative that seems like a reasonable estimate.

For each question choose from the following alternatives:
0 - never ; 1 - almost never ; 2 - sometimes ; 3 - fairly often ; 4 - very often

l. In the last month, how often have you been upset because of something that happened unexpectedly?
2. In the last month, how often have you felt that you were unable to control the important things in your life?
3. In the last month, how often have you felt nervous and stressed?
4. In the last month, how often have you felt confident about your ability to handle your personal problems?
5. In the last month, how often have you felt that things were going your way?
6. In the last month, how often have you found that you could not cope with all the things that you had to do?
7. In the last month, how often have you been able to control irritations in your life?
8. In the last month, how often have you felt that you were on top of things?
9. In the last month, how often have you been angered because of things that happened that were outside of your control?
10. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?

QUESTIONNAIRE 3

This questionnaire asks you to indicate what you generally do and feel when you experience stressful events. Obviously, different events bring out somewhat different responses, but think about what you usually do when you are under a lot of stress.

Then respond to each of the following items by blackening one number on your answer sheet for each, using the response choices listed just below. Please try to respond to each item separately in your mind from each other item. Choose your answers thoughtfully, and make your answers as true for you as you can. Please answer every item. There are no "right" or "wrong" answers, so choose the most accurate answer for you--not what you think "most people" would say or do. Indicate what you usually do when you experience a stressful event.

1 = I haven't been doing this at all
2 = I've been doing this a little bit
3 = I've been doing this a medium amount
4 = I've been doing this a lot

1. I've been turning to work or other activities to take my mind off things.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

2. I've been concentrating my efforts on doing something about the situation I'm in.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

3. I've been saying to myself "this isn't real."
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

4. I've been using alcohol or other drugs to make myself feel better.
☐I haven't been doing this at all
☐I’ve been doing this a little bit

☐I've been doing this a medium amount
☐I've been doing this a lot

5. I've been getting emotional support from others.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

6. I've been giving up trying to deal with it.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

7. I've been taking action to try to make the situation better.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

8. I've been refusing to believe that it has happened.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

9. I've been saying things to let my unpleasant feelings escape.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

10. I've been getting help and advice from other people.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

11. I've been using alcohol or other drugs to help me get through it.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

12. I've been trying to see it in a different light, to make it seem more positive.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

13. I've been criticizing myself.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

14. I've been trying to come up with a strategy about what to do.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

15. I've been getting comfort and understanding from someone.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

16. I've been giving up the attempt to cope.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

17. I've been looking for something good in what is happening.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount

☐I've been doing this a lot

18. I've been making jokes about it.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

19. I've been doing something to think about it less, such as going to movies, watching TV, reading, daydreaming, sleeping, or shopping.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

20. I've been accepting the reality of the fact that it has happened.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

21. I've been expressing my negative feelings.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

22. I've been trying to find comfort in my religion or spiritual beliefs.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

23. I've been trying to get advice or help from other people about what to do.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

24. I've been learning to live with it.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

25. I've been thinking hard about what steps to take.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

26. I've been blaming myself for things that happened.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

27. I've been praying or meditating.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot

28. I've been making fun of the situation.
☐I haven't been doing this at all
☐I’ve been doing this a little bit
☐I've been doing this a medium amount
☐I've been doing this a lot